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POSSENTIAL HAZARDOUS WASTE SITE IDENTIFICATION AND PRELIMINARY ASSESSMENT		REGION	SITE NUMBER/FILE NUMBER Signed by No.
NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.			
REVIEWED BY: <u>JL 3/1/91</u>			
GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Team Force (EN-375); 401 M St., SW, Washington, DC 20460.			
I. SITE IDENTIFICATION			
A. SITE NAME: <u>ALCOA Anderson County Works</u>		B. LATITUDE (or other identifier): <u>South of U.S. Hwy 74</u>	
C. CITY: <u>Palestine</u>		D. STATE: <u>Texas</u> E. ZIP CODE: <u>75801</u> F. COUNTY NAME: <u>Anderson</u>	
G. OWNER/OPERATOR (if known): <u>Aluminum Company of America</u>		H. TELEPHONE NUMBER: <u>214/729-2281</u>	
I. NAME: <u>P.O. Box 558</u>			
		J. CITY: <u>Palestine, Texas</u> K. ZIP CODE: <u>75801</u>	
M. TYPE OF OWNERSHIP: <input type="checkbox"/> FEDERAL <input type="checkbox"/> STATE <input type="checkbox"/> COUNTY <input type="checkbox"/> MUNICIPAL <input checked="" type="checkbox"/> PRIVATE <input type="checkbox"/> UNKNOWN			
N. SITE DESCRIPTION: Chlorinated organics formed in production process, and other hazardous wastes are stored or disposed of on-site.			
O. HOW IDENTIFIED (by, current complaints, OSRA citations, etc.): <u>T DWR District 5F-1es</u>		P. DATE IDENTIFIED (mon, day, & yr): <u>9-18-80</u>	
Q. PRINCIPAL STATE CONTACT:			
R. NAME: <u>Mary Woods</u>		S. TELEPHONE NUMBER: <u>214/984-0636</u>	
II. PRELIMINARY ASSESSMENT (Complete this section first)			
A. APPARENT SERIOUSNESS OF PROBLEM: <input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE <input checked="" type="checkbox"/> 5. UNKNOWN			
B. RECOMMENDATION: <input type="checkbox"/> 1. NO ACTION NEEDED (no hazard) <input type="checkbox"/> 2. SITE INSPECTION NEEDED <input type="checkbox"/> 3. TENTATIVELY SCHEDULED FOR			
C. WILL BE PERFORMED BY: <u>John Witherspoon</u>			
D. SITE INSPECTION NEEDED (for priority): <u>REORGANIZED</u>			
E. PREPARER INFORMATION:			
F. NAME: <u>Mary Woods</u>		G. TELEPHONE NUMBER: <u>214/984-0636</u> H. DATE (mon, day, & yr): <u>9-30-80</u>	
III. SITE INFORMATION			
I. SITE STATUS: <input checked="" type="checkbox"/> 1. ACTIVE (These are sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequent quantity.) <input type="checkbox"/> 2. INACTIVE (These sites which no longer receive wastes) <input type="checkbox"/> 3. OTHER (specify) <u>(Three sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)</u>			
J. IS GENERATOR ON SITE? <input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (specify) <u>3334</u>			
K. AREA OF SITE (in acres): <u>app 40 acres</u>		L. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES	
M. ARE THERE BUILDINGS ON THE SITE? <input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (specify) <u>Laboratory and control buildings</u>		N. LATITUDE (deg-min-sec) <u>28° 40' 10" N</u> O. LONGITUDE (deg-min-sec) <u>96° 32' 30" W</u>	

IF THE PAGE FILMED IS NOT
AS LEGIBLE AS THIS LABEL,
IT IS DUE TO THE QUALITY
OF THE ORIGINAL.

RETAKE TARGET

Because of suspected operator
error or camera malfunction, the
preceding page was refilmed and
appears as the next image.

printed from front

CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity (ref) and sub-activity relating to each activity by marking 'X' in the appropriate boxes.

A. TRANSPORTER	B. STORER	C. TREATER	D. DISPOSER
1. TRAILER	1. PILE	1. FILTRATION	1. LANDFILL
2. SHIP	2. SURFACE IMPOUNDMENT	2. INCINERATION	2. LANDFARM
3. AIRCRAFT	3. DRUMS	3. VOLUME REDUCTION	3. OPEN DUMP
X 4. TRUCK	4. TANK ABOVE GROUND	4. RECYCLING/RECOVERY	4. SURFACE IMPOUNDMENT
5. PIPELINE	5. TANK BELOW GROUND	5. CHEM/PHYS. TREATMENT	5. MIDNIGHT DUMPING
6. OTHER (specify)	6. OTHER (specify)	6. BIOLOGICAL TREATMENT	6. INCINERATION
		7. WASTE OIL REPROCESSING	7. UNDERGROUND INJECTION
		8. SOLVENT RECOVERY	8. OTHER (specify)
		9. OTHER (specify)	

E. SPELL OUT DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

1. UNKNOWN 2. LIQUID 3. SOLID 4. SLUDGE 5. GAS

B. WASTE CHARACTERISTICS

1. UNKNOWN 2. CORROSIVE 3. IGNITABLE 4. RADIOACTIVE 5. HIGHLY VOLATILE
 6. TOXIC 7. REACTIVE 8. INERT 9. FLAMMABLE

C. OTHER SPECIES

D. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

available from external estimates and inventories

2. Estimate the amount/specify unit of measure of waste by category. Mark 'X' to indicate which wastes are present.

A. SLUDGE	B. OIL	C. SOLVENTS	D. CHEMICALS	E. SOLIDS	F. OTHER
24	2000				100
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
cu.yds/mo	gal./mo				cu.yds/mo
A. FINE PIGMENTS	X OILY WASTES	X INORGANIC SOLVENTS	X INORGANIC	X INORGANIC	X LABORATORY/PHARMACEUT.
X METAL SLUDGES	X (BIO)OTHER SPECIES	X INORGANIC SOLVENTS	X THICKENING LIQUORS	X ABSORBENT	X HOSPITAL
	waste oil sold for recovery				
X ALUMINUM SLUDGE			X CAUSTICS	X MINE/TAILINGS	X RADIOACTIVE
X (BIO)OTHER SPECIES			X PESTICIDES	X FERROUS/INORGANIC	X MUNICIPAL
chromium hydroxide sludge			X DYES/INKS	X NON-FERROUS/INORGANIC	X (BIO)OTHER SPECIES
			X CYANIDE	X (BIO)OTHER SPECIES	lunchroom and general trash
			X PHENOLS	39.8 tons/mo aluminum contaminated with carbon and hydrocarbons	
			X HALOGENS		
			X METALS	16.1 tons/mo waste dust contaminated with chloride and metals	
			X OTHER		

Used From Page 2

WASTE RELATED INFORMATION (cont'd)

1. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

Liquid PCB waste
Solids contaminated with chlorinated organics
aluminum contaminated with carbon and organics

2. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE

VI. HAZARD DESCRIPTION				
A. TYPE OF HAZARD	B. DATES HAZARD DRAFTED	C. ALLEGED INCIDENT DATE (A)	D. DATE OF INCIDENT (INCIDENT)	E. REMARKS
1. NO HAZARD				
2. HUMAN HEALTH				
3. NON WORKER INJURY/EXPOSURE				
4. WORKER INJURY				
5. CONTAMINATION OF WATER SUPPLY				
6. CONTAMINATION OF FOOD CHAIN				
7. CONTAMINATION OF GROUND WATER				
8. CONTAMINATION OF SURFACE WATER				
9. DAMAGE TO FLORA/FARNA				
10. FISH/HULL				
11. CONTAMINATION OF AIR				
12. NOTICEABLE ODORS				
13. CONTAMINATION OF SOIL				
14. PROPERTY DAMAGE				
15. FIRE OR EXPLOSION				
16. SPILLS/LEAKING CONTAINERS/ WILDERNESS/LIQUIDS				
17. SEWER, STORM WATER PROBLEMS				
18. EROSION PROBLEMS				
19. INADEQUATE SECURITY				
20. INCOMPATIBLE WASTES				
21. IMPROPER DUMPING				
22. OTHER SPECIFIC:	See Site Description Page attached.	X		

ENVIRONMENTAL PROFILE																			
VII. PERMIT INFORMATION																			
A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.																			
<input checked="" type="checkbox"/> 1. FEDERAL PERMIT <input type="checkbox"/> 2. SPCC PLAN <input checked="" type="checkbox"/> 3. STATE PERMIT/HAN <input type="checkbox"/> 4. LOCAL PERMIT <input type="checkbox"/> 5. RCRA TRANSPORTER <input type="checkbox"/> 6. RCRA TREATER <input type="checkbox"/> 7. RCRA DISPOSER <input type="checkbox"/> 8. RCRA REGISTRATION FEDERAL PERMITS: <input type="checkbox"/> HAZARDOUS WASTE STATE PERMITS: <input type="checkbox"/> HAZARDOUS WASTE LOCAL PERMITS: <input type="checkbox"/> HAZARDOUS WASTE RCRA TRANSPORTER: #01919 RCRA TREATER: <input type="checkbox"/> RCRA DISPOSER: <input type="checkbox"/> RCRA REGISTRATION: Solid Waste Registration #30143																			
B. IS OTHER ENVIRONMENTAL COMPLIANCE INFORMATION AVAILABLE?																			
<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNKNOWN																			
C. WITH RESPECT TO THE REGULATION NAME & NUMBER:																			
VIII. PAST REGULATORY ACTIONS																			
A. NONE <input type="checkbox"/> B. YES (complete items 1, 2, 3, & 4 below)																			
None related to Solid Waste																			
IX. INSPECTION ACTIVITY (past or ongoing)																			
A. NONE <input type="checkbox"/> B. YES (complete items 1, 2, 3, & 4 below)																			
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X. REMEDIAL ACTIVITY (past or ongoing)																			
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NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.																			

SITE DESCRIPTION

Make additional comments or narrative description of situation known or reported to exist at the site based on file review. Include dates and description of any incidents documented in file.

Chromium hypochlorite sludge is disposed of in a 3 1/2 acre Hypalon lined pond.

The landfill called the dry solids pond #1, which is artificial lined will soon be closed. The landfill called the dry solids pond #2 is lined with PVC and has a leachate collection system. There are four monitoring wells in the solid waste area; one up hill and three down hill. Runn water is diverted around the solid waste site and in case of contamination, storm water can be routed to treatment system and discharged at Outfall 002.

Waste oil is shipped for recovery Sodium hypochlorite is shipped off-site for disposal. PCB waste and solids

(over)

contaminated by chlorinated
organics are shipped to Wes-Con Inc.
Grandview Idaho. A small
portion of a 20 - acre plot is used
for the landfill disposal of general
trash.